



ADVANCE CARE PLANNING DOCUMENTS

Advance Directive

An Advance Directive is a document that states what kinds of treatment you do or do not want to receive should you become incapacitated and/or names another person to make those decisions for you. Advance Directives can come in three forms:

- A Proxy Directive, which names a person to make healthcare decisions when you no longer can (this is sometimes called a “health care proxy” or a “health care power of attorney”);
- An Instruction Directive, which expresses your desires/instructions for treatment (this is often called a “Living Will”); or
- A Combined Directive, which names a proxy and gives instructions for treatment.

There is no specific form of advance directive that must be followed in New Jersey and you do not need a lawyer to prepare it. It can be as simple as a letter stating your health care wishes, or naming the person you trust to make health care decisions for you. The only requirement is that it be in writing and signed by you and two adult witnesses. A commonly used advance directive form is: http://www.state.nj.us/health/healthfacilities/documents/ltc/advance_directives.pdf

There are other types of planning documents that ask more thorough questions about the individual’s goals and wishes at the end of life. Two examples of these are:

<http://www.agingwithdignity.org/forms/5wishes.pdf>

http://www.rihlp.org/pubs/Your_life_your_choices.pdf

These types of documents may be helpful in guiding more in-depth conversation about end-of-life decisions.

DNR (Do Not Resuscitate) Order

A DNR is a standing medical order that informs facility medical personnel that the patient should not receive cardiopulmonary resuscitation. This form is filled out by the patient’s doctor in conversation with the patient and/or the patient’s surrogate decision maker.

OOHDNR (Out-of-Hospital Do Not Resuscitate) Order

An OOHDNR is a standing medical order indicating that a patient living outside of a hospital should not receive cardiopulmonary resuscitation. This is commonly used by first responders, such as paramedics (as opposed to a nursing home or hospital). The completed form should be displayed prominently where emergency personnel can see it or access it, such as on the refrigerator.

http://www.njha.com/qualityinstitute/Pdf/OutofHospital_DNR_Form.pdf

DNI (Do Not Intubate) Order

A DNI is a standing medical order that informs facility medical personnel no breathing tube will be placed in the throat in the event of breathing difficulty or respiratory arrest. This form is filled out by the patient's doctor in conversation with the patient and/or the patient's surrogate decision maker.

DNH (Do Not Hospitalize) Order

A DNH order is a standing medical order that the patient should not be moved to the hospital under certain circumstances. For example, an elderly resident with congestive heart failure might not wish to be moved from the facility to a hospital if her breathing becomes labored. A DNH does not apply to all hospitalization decisions, however. If the resident breaks her leg, for instance, she would be sent to the hospital for evaluation and treatment.

POLST (Practitioner Orders for Life Sustaining Treatment)

A POLST form is a standing medical order signed by your doctor that indicates your preferences for certain kinds of medical treatment should you become incapacitated. Some of POLST's benefits (as compared to an Advance Directive) are that it can be immediately implemented and will travel with the patient in his/her medical record from one health care setting to another. Unlike DNR/DNH, POLST only has to be filled out once (although it can always be revised) and does not have to be completed each time the patient moves from one setting to another (from hospital to nursing home, for example).